

DNS Request Form

Date: _____

Site Information

Name of Organization: _____

Address: _____

Name of administrative, or onsite, contact: _____

E-mail: _____ Phone: _____

Name of technical contact: _____

E-mail: _____ Phone: _____

Request

☐

New Domain

☐

Modify Primary Name Server

☐

Remove Domain

☐

Modify Secondary Name Server

Comments: _____

Server Information

Fully-qualified domain name: _____



Primary domain name server host name: _____

Primary domain name server IP address: _____

Secondary domain name server host name: _____

Secondary domain name server IP address: _____